U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official Use Only			
1.5. 2007			
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.			
1. File Number U - 8814	2. Fiscal Year Covered From:		
	@1/01/2004 Through: 13/31/2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Willard L Casto, Jr.	Name Iron Workers Local #301		
	Labor Organization File Number 0/0//5		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 2425 Hampshire Drive	street 2425 Hampshire Drive		
city Charleston	city Charleston		
State WV ZIP Code + 4 253i2 - 1315	State WV ZIP Code +4 25312 - 1315		
5. Position in labor organization. Financial Secretary/Treasurer-Business Agent			
Enter appropriate data below If, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
	sions set forth in the instructions): derived income or other economic benefit of		
(except as specified in the exclusion of	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any).	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 8/35/04 Dinner (Fish Fry) \$23.44 each Wite Self 8/35/04 Golf \$33.75 self 8/36/04 Dinner (Banyuch) \$14,95 each Wite Self		
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Iron Workers Dist. Council of St. Louis Vic. Trade Name, if any:	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.		
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A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization of the second and address of Employer (including trade name, if any). Name Iron Workers Dist. Council of St. Louis Vic Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 3544 Watson Rd. City St. Louis State Missouri ZIP Code + 4 [63134-2059]	sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 8/35/04 Dinner (Fish Fry) \$33.44 each Wife Self 8/35/04 Colf \$33.75 self 8/35/04 Dinner (Banguet) \$14,95 each Wife Self 7/36/04 Dinner (Banguet) \$14,95 each Wife Self 7/		
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Name of Person Filling Willard L. Casto, Jr.		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
8. Name and address of Business (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	9. Business deals with: a. Labor Organiza b. Trust c. Employer	tion		
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City ZIP Code + 4	11.a. Nature of such dealing the such de	e of such dealing.		
C. Received from any employer (other than an employer covered under parts A and B above)				
or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Segal Trade Name, if any: P.O. Box, Bldg., Room No., if any Suite 400 Street 101 North Walker Dr. City Chicago State 12 ZIP Code +4 WWW-1724	14.a. Nature of payment.	r at Long Horn Steak House r meeting with Eight ees of the Iron Workers ict Council.		
13.b. Is the Business an Employer or Consultant 7	14.b. Amount of payment.	50,00		

Name of Person Filing Willard K. Casto, Jr.		File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
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10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	1 i.d. Nature of Such deali	y.		
City ZIP Code + 4	11.b. Approximate dollar value 12.a. Nature of interest held			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Segal Advisors Trade Name, if any: P.O. Box, Bldg., Room No., if any Suffe 400 Street 101 North Wather Dr. City Chicago State 1 L ZIP Code +4 LOGO 1734	14.a. Nature of payment.	at Lone Star \$39.00 at Lone Star \$39.00 at Lone Star \$99.00 at Lone Star \$39.00 at Lone Star \$49.00		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	1190,00		



DISCLAIMER

The transactions, dealings and interests that are detailed in the attached LM-30 Report represent my good faith effort to reconstruct the reportable occurrences for the period of January 1, 2004 to December 31, 2004. Accurate records of reportable occurrences were not kept for the 2004 fiscal year, and some or many items may have been unintentionally omitted. If, in the future, it comes to my attention that there exists a transaction, dealing or interest that should have been reported for the period of January 1, 2004 to December 31, 2004, I will immediately file an amended LM-30 Report.

Willard L. Casto J. 8112105 Signature Date